Tax Collector	Permit Fee: \$	+ State Fee:	= Total Fee: \$
ApprovedDenied		PERM	IIT #:
	**		IIT #:
Date:	na and interior		
	Town of Broo	. I	
	PERMIT APPLI		
	WOODSTOV		
APPLICATION DATE:	I	-	
Property			
Street Address:			
Owner Name:			
Owner Mailing			
Address:		Diagram	
		Phon	e:
Applicant Name:		Phone	e:
Contractor			
Name:		Phone	e:
Contractor			
Address:			
Contractor			
License #:		Exp. I	Date:
**A copy of the	e Manufacturer's Inst submitted with this	allation Guide application**	lines must be
Start Date:	Completion Date:	Value of	Work: \$
Thereby certify that I am the owner and that I have been authorized to his jurisdiction. In addition, if a	r of record of the above named prope make this application as the designa a permit for work is issued, I certif rity to enter areas covered by such per	erty, or that the proposed vited agent and I agree to c	work is authorized by the owner onform to all applicable laws of
Signature: Owner/Agent	Date Sig	gnature: Contractor	Date
Building Official Approval 9/10	Date Wi	Witness Acknowledgement Signature Date	

## STATE OF CONNECTICUT WORKERS' COMPENSATION COMMISSION

# Building Permit Affidavit for Property Owners or Sole Proprietors (Conn. Gen. Stat. § 31-286b)

Property located at
In the town of
Name of building permit applicant:
Please check one:
1 I am the owner of the above property.
2 I am the sole proprietor of a business.
2A. Name of business
2B. Federal Employer Identification Number (FEIN)
Pursuant to § 31-286b, "a property owner or sole proprietor [who] intends to act as a general contractor or principal employer" may provide either a certificate of workers' compensation insurance or a "sworn notarized affidavit stating that he will require proof of workers' compensation insurance for all those employed on the job site in accordance with this chapter."
Please check one:
<ol> <li>I do not intend to act as a general contractor or principal employer.</li> <li>[Sign and stop here]</li> </ol>
Signature of applicant
<ol> <li>I intend to act as a general contractor or principal employer. Applicant must either provide a certificate of workers' compensation insurance or sign the affidavit below.</li> </ol>
<u>Affidavit</u>
I hereby swear and attest that I will require proof of workers' compensation insurance for every contractor, subcontractor, or other worker before he/she engages in work on the above property in accordance with the Workers' Compensation Act (Chapter 568).
I understand that pursuant to § 31-275 C.G.S., officers of a corporation and partners in a partnership may elect to be excluded from coverage by filing a waiver with the appropriate District Office; and that a sole proprietor of a business is not required to have coverage unless he files his intent to accept coverage.
Signature of applicant
Subscribed and sworn to before me this day of, 200
(Notary Public/ Commissioner of the Superior Court)

#### Town of Brookfield Land Use Office 100 Pocono Rd. Brookfield, CT 06804

### ATTENTION PERMIT HOLDER

\*\*It is the responsibility of the permit holder or agent to call for inspections (minimum 24 hours in advance). The permit holder is responsible for all construction for that project. An oversight of code requirement(s) during plan review does not relieve you of your responsibility for compliance. During inspections, you may be required to make changes to insure that the current building & fire codes are satisfied.\*\*

### Per Chapter 127 of the Brookfield Code of Ordinances:

Building Inspections which result in a failure will incur an additional \$25.00 fee for each reinspection.

All reinspection fees shall be due and payable prior to the issuance of a Certificate of Occupancy.

### Per Chapter 242 of the Brookfield Code of Ordinances:

Site Stablization Inspections which result in a failure will incur an additional \$25.00 fee for each reinspection.

All reinspection fees shall be due and payable prior to bond release.

I acknowledge that per the Brookfield Code of Ordinances, I will be responsible for reinspection fees as outlined above. I also understand that it is my responsibility to call for inspections of the project.

Applicant/Agent signature	Date

#### **TO CONTRACTORS:**

CT. General Statutes (effective January 1, 2005):

§20-338b Building permit applications. Who may sign.

Any licensed contractor who seeks to obtain a permit from a building official may sign the building permit application personally or delegate the signing of the building permit application to an employee, subcontractor or other agent of the licensed contractor, provided, the licensed contractor's employee, subcontractor or other agent submits to the building officiala dated letter on the licensed contractor's letterhead, signed by the licensed contractor, stating that the bearer of the letter is authorized to sign the building permit application as the agent of the licensed contractor. The letter shall not be a copy or facsimile, but shall be an original letter bearing the original signature of the licensed contractor. The letter shall also include:

- 1. The name of the municipality where the work is to be performed;
- 2. The job name or a description of the job;
- 3. The starting date of the job;
- 4. The name of the licensed contractor;
- 5. The name of the licensed contractor's agent; and
- 6. The license numbers of all contractors to be involved in the work.